

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

TREY GOWDY FOR CONGRESS

ADDRESS (number and street)

PO BOX 3324

Check if different
than previously
reported. (ACC)

SPARTANBURG

SC

29304

2. FEC IDENTIFICATION NUMBER ▼

C

C00462523

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

SC

04

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Marvin Quattlebaum

Signature of Treasurer

Marvin Quattlebaum

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

04

12

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 34

Write or Type Committee Name

TREY GOWDY FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	32358.76	435774.25
(b) Total Contribution Refunds (from Line 20(d))	0.00	6600.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	32358.76	429174.25
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	17913.62	118035.99
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	150.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	17913.62	117885.99
8. Cash on Hand at Close of Reporting Period (from Line 27).....	346808.48	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 34

Write or Type Committee Name

TREY GOWDY FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

2550.00

172400.00

(ii) Unitemized.....

2808.76

8818.42

(iii) TOTAL of contributions from individuals ▶

5358.76

181218.42

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

27000.00

254555.83

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

32358.76

435774.25

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

150.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

32358.76

435924.25

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 34

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	17913.62	118035.99
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	3600.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	3000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	6600.00
21. OTHER DISBURSEMENTS	57308.00	246258.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	75221.62	370893.99

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	389671.34
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	32358.76
25. SUBTOTAL (add Line 23 and Line 24).....	422030.10
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	75221.62
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	346808.48

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

PAGE 5 OF 34

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

F. HUGH ATKINS

Mailing Address 307 CAROLINA CLUB DRIVE

City

SPARTANBURG

State

SC

Zip Code

29306

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

ATKINS REALTY COMPANY

Occupation

OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.11913

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

SALVATORE J. CANTARELLA

 Mailing Address 100 CENTRAL AVENUE
 UNIT 304

City

SARASOTA

State

FL

Zip Code

34236

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

XL INSURANCE COMPANY LTD.

Occupation

INSURANCE UNDERWRITER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : SA11AI.12105

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DANE D. FULMER

Mailing Address 5209 ROSEWOOD CIRCLE

City

FORT SMITH

State

AR

Zip Code

72903

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

DANE FULMER INVESTMENTS

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.11921

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 34
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

A. Full Name (Last, First, Middle Initial) THOMAS GUY GREAVES		Date of Receipt M M / D D / Y Y Y Y 02 / 21 / 2014	
Mailing Address 105 PINE FOREST DRIVE		Transaction ID : SA11AI.11883	
City GREENVILLE	State SC	Zip Code 29601	Amount of Each Receipt this Period _____ 50.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C _____			
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	Election Cycle-to-Date _____ 250.00		
B. Full Name (Last, First, Middle Initial) TRAPIER K. HART		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 83 MOORE COURT		Transaction ID : SA11AI.11911	
City GREENVILLE	State SC	Zip Code 29615	Amount of Each Receipt this Period _____ 500.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C _____			
Name of Employer SELF-EMPLOYED	Occupation INVESTMENT BROKER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	Election Cycle-to-Date _____ 500.00		
C. Full Name (Last, First, Middle Initial) SHIRLEY MOON		Date of Receipt M M / D D / Y Y Y Y 03 / 22 / 2014	
Mailing Address PO BOX 1831		Transaction ID : SA11AI.12099	
City CARMEL	State CA	Zip Code 93921	Amount of Each Receipt this Period _____ 250.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C _____			
Name of Employer RETIRED	Occupation HOSPITAL ADMINISTRATOR		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	Election Cycle-to-Date _____ 250.00		
SUBTOTAL of Receipts This Page (optional)		_____ 800.00	
TOTAL This Period (last page this line number only)		_____	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 34
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

A. Full Name (Last, First, Middle Initial) WAYNE MOON		Date of Receipt M M / D D / Y Y Y Y 03 / 22 / 2014	
Mailing Address PO BOX 1831		Transaction ID : SA11AI.12110	
City CARMEL	State CA	Zip Code 93921	Amount of Each Receipt this Period 250.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation CONSULTANT/REALTOR		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
B. Full Name (Last, First, Middle Initial) W. LOUIE MULLIKIN III		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 413 FAGAN DRIVE		Transaction ID : SA11AI.11909	
City INMAN	State SC	Zip Code 29349	Amount of Each Receipt this Period 250.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
C. Full Name (Last, First, Middle Initial) JOHN R. TAYLOR		Date of Receipt M M / D D / Y Y Y Y 02 / 03 / 2014	
Mailing Address 29355 GRAND COTEAU DRIVE		Transaction ID : SA11AI.11881	
City FAIR OAKS RANCH	State TX	Zip Code 78015	Amount of Each Receipt this Period 250.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
SUBTOTAL of Receipts This Page (optional).....		750.00	
TOTAL This Period (last page this line number only).....		2550.00	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF CARDIOLOGY POLITICAL ACTION COMMITTEE

Mailing Address 2400 N ST NW

City	State	Zip Code
WASHINGTON	DC	20037

FEC ID number of contributing federal political committee. **C** C00375360

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		13		2014

Transaction ID : SA11C.11863

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL ACTION COMMITTEE

Mailing Address PALLADIAN 1
 220 LEIGH FARM RD

City	State	Zip Code
DURHAM	NC	27707

FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : SA11C.11929

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC)

Mailing Address 1111 North Fairfax St.

City	State	Zip Code
Alexandria	VA	22314

FEC ID number of contributing federal political committee. **C** C00012880

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		03		2014

Transaction ID : SA11C.11896

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICAN STAFFING ASSOCIATION STAFFINGPAC

Mailing Address 277 S. WASHINGTON ST., SUITE 200

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

 FEC ID number of contributing
 federal political committee.

C C00145623

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11C.11933

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ASEA BROWN BOVERI (ABB) POLICY IMPROVEMENT PROGRAM

 Mailing Address 1455 PENNSYLVANIA AVENUE NW
 WILLARD BUILDING SUITE 210

City WASHINGTON	State DC	Zip Code 20004
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 FEC ID number of contributing
 federal political committee.

C C00041947

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11C.11923

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CATERPILLAR INC. EMPLOYEE POLITICAL ACTION COMMITTEE, THE

Mailing Address 100 N.E. Adams

City Peoria	State IL	Zip Code 61629
----------------	-------------	-------------------

 FEC ID number of contributing
 federal political committee.

C C00148031

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11C.11928

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

CORNING INCORPORATED EMPLOYEES POLITICAL ACTION COMMITTEE (COREPAC)

A.

Mailing Address 325 7TH STREET NW

SUITE 600

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.

C C00033589

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11C.11927

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CSX CORPORATION GOOD GOVERNMENT FUND

B.

Mailing Address 1331 PENNSYLVANIA AVE, NW, STE 560

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.

C C00163832

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 21 / 2014

Transaction ID : SA11C.11891

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CSX CORPORATION GOOD GOVERNMENT FUND

C.

Mailing Address 1331 PENNSYLVANIA AVE, NW, STE 560

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.

C C00163832

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 21 / 2014

Transaction ID : SA11C.11892

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

3000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 34

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

EQUIFAX INC. POLITICAL ACTION COMMITTEE**A.**

Mailing Address 1550 PEACHTREE STREET NW

City

ATLANTA

State

GA

Zip Code

30309

FEC ID number of contributing
federal political committee.**C**

C00143867

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 31 2014**Transaction ID : SA11C.11930**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

FOLEY & LARDNER POLITICAL FUND, INC.**B.**

Mailing Address 3000 K STREET NW

City

WASHINGTON

State

DC

Zip Code

20007

FEC ID number of contributing
federal political committee.**C**

C00105338

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
02 21 2014**Transaction ID : SA11C.12113**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)**C.**Mailing Address 1299 Pennsylvania Ave NW
Suite 900W

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.**C**

C00024869

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y
02 21 2014**Transaction ID : SA11C.11890**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

3000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 34

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 101 Constitution Ave. NW
Suite 500 West

City	State	Zip Code
Washington	DC	20001

FEC ID number of contributing
federal political committee.

C C00096156

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 03 / 2014

Transaction ID : SA11C.11868

Amount of Each Receipt this Period

944.17

CONTRIBUTION

Full Name (Last, First, Middle Initial)

HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 101 Constitution Ave. NW
Suite 500 West

City	State	Zip Code
Washington	DC	20001

FEC ID number of contributing
federal political committee.

C C00096156

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5055.83

Date of Receipt

M M / D D / Y Y Y Y
02 / 03 / 2014

Transaction ID : SA11C.11869

Amount of Each Receipt this Period

55.83

CONTRIBUTION

Full Name (Last, First, Middle Initial)

HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 101 Constitution Ave. NW
Suite 500 West

City	State	Zip Code
Washington	DC	20001

FEC ID number of contributing
federal political committee.

C C00096156

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

6055.83

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11C.11936

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 34

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

INSTITUTE OF SCRAP RECYCLING INDUSTRIES INC. POLITICAL ACTION COMMITTEE

A.

Mailing Address 1615 L ST NW

SUITE 600

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C

C00046086

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 03 / 2014

Transaction ID : SA11C.11870

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

INTERNATIONAL PAPER POLITICAL ACTION COMMITTEE (IP-PAC)

B.

Mailing Address 1101 Pennsylvania Avenue NW

Suite 200

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.

C

C00034405

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11C.11935

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE (ICI PAC)

C.

Mailing Address 1401 H STREET NW SUITE 1200

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C

C00105981

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 21 / 2014

Transaction ID : SA11C.11893

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 34

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)

Mailing Address 600 14th Street, NW
Suite 800

City	State	Zip Code
Washington	DC	20005

FEC ID number of contributing
federal political committee.

C C00236489

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03	/	03	/	2014

Transaction ID : SA11C.11895

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)

Mailing Address 1771 N STREET NW

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing
federal political committee.

C C00009985

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02	/	03	/	2014

Transaction ID : SA11C.11872

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 North Michigan Avenue

City	State	Zip Code
Chicago	IL	60611

FEC ID number of contributing
federal political committee.

C C00030718

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01	/	21	/	2014

Transaction ID : SA11C.11866

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

3000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 OF 34

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)
NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

A. Mailing Address **469 HOSPITAL DR.**
SUITE C

City State Zip Code
GASTONIA NC 28054

FEC ID number of contributing
federal political committee.

C **C00405555**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

03 / 31 / 2014

Transaction ID : SA11C.11932

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. SCANA CORPORATION FEDERAL PAC

Mailing Address **100 SCANA Pkwy**
Attn: Mark Cannon-C101

City State Zip Code
Cayce SC 29033

FEC ID number of contributing
federal political committee.

C **C00200907**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

03 / 03 / 2014

Transaction ID : SA11C.11899

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. THE BOEING COMPANY POLITICAL ACTION COMMITTEE

Mailing Address **1200 WILSON BLVD**

City State Zip Code
ARLINGTON VA 22209

FEC ID number of contributing
federal political committee.

C **C00142711**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

02 / 21 / 2014

Transaction ID : SA11C.11894

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 34

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

TIMKEN COMPANY GOOD GOVERNMENT FUND, THE**A.**

Mailing Address 1835 Dueber Avenue S.W.

City

Canton

State

OH

Zip Code

44706

FEC ID number of contributing
federal political committee.**C** C00311308

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2014

Transaction ID : SA11C.11887

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

U.S. TRAVEL ASSOCIATION PAC**B.**Mailing Address 1100 NEW YORK AVENUE
SUITE 450W

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.**C** C00457754

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		03		2014

Transaction ID : SA11C.11897

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT**C.**

Mailing Address 702 S.W. 8TH STREET

City

BENTONVILLE

State

AR

Zip Code

72716

FEC ID number of contributing
federal political committee.**C** C00093054

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : SA11C.11925

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

2500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 OF 34

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT

Mailing Address 702 S.W. 8TH STREET

City

BENTONVILLE

State

AR

Zip Code

72716

FEC ID number of contributing
federal political committee.

C C00093054

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

5500.00

Date of Receipt

M M / D D / Y Y Y Y
03 31 2014

Transaction ID : SA11C.11926

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

27000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 34

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. 3FISH, INC.

Mailing Address 700 TULIP DRIVE

City	State	Zip Code
GASTONIA	NC	28052

Purpose of Disbursement
EVENT FOOD

003

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

Amount of Each Disbursement this Period

809.90

Transaction ID : SB17.11989

B. AT&T MOBILITY

Mailing Address GLENRIDGE HIGHLANDS TWO, 5565

City	State	Zip Code
ATLANTA	GA	30342

Purpose of Disbursement
CELL PHONE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2014

Amount of Each Disbursement this Period

139.01

Transaction ID : SB17.11940

C. AT&T MOBILITY

Mailing Address GLENRIDGE HIGHLANDS TWO, 5565

City	State	Zip Code
ATLANTA	GA	30342

Purpose of Disbursement
CELL PHONE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2014

Amount of Each Disbursement this Period

139.01

Transaction ID : SB17.11959

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1087.92

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 34

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AT&T MOBILITY

Mailing Address GLENRIDGE HIGHLANDS TWO, 5565

City	State	Zip Code
ATLANTA	GA	30342

Purpose of Disbursement
CELL PHONE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03	/	18	/	2014

Amount of Each Disbursement this Period

139.01

Transaction ID : SB17.11983

B. AT&T MOBILITY (DATA COVERAGE)

Mailing Address POST OFFICE BOX 537104

City	State	Zip Code
ATLANTA	GA	30353

Purpose of Disbursement
DATA COVERAGE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01	/	02	/	2014

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.11995

C. CAPITOL HILL CLUBMailing Address 300 FIRST STREET
SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
EVENT FOOD

003

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01	/	20	/	2014

Amount of Each Disbursement this Period

424.50

Transaction ID : SB17.11939

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

593.51

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 34

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CAPITOL HILL CLUBMailing Address 300 FIRST STREET
SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
EVENT FOOD

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		14		2014

Amount of Each Disbursement this Period

320.40

Transaction ID : SB17.11957

B. CAPITOL HILL CLUBMailing Address 300 FIRST STREET
SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
EVENT FOOD

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2014

Amount of Each Disbursement this Period

695.03

Transaction ID : SB17.11958

C. CAPITOL HILL CLUBMailing Address 300 FIRST STREET
SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
EVENT FOOD

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		18		2014

Amount of Each Disbursement this Period

554.43

Transaction ID : SB17.11977

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1569.86

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 34

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GLOBALVISIONMailing Address 301 NORTH MAIN STREET
SUITE 1119

City GREENVILLE State SC Zip Code 29601

Purpose of Disbursement
PHONE LINE

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2014

Amount of Each Disbursement this Period

36.00

Transaction ID : SB17.11941

B. GLOBALVISIONMailing Address 301 NORTH MAIN STREET
SUITE 1119

City GREENVILLE State SC Zip Code 29601

Purpose of Disbursement
PHONE LINE

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2014

Amount of Each Disbursement this Period

36.00

Transaction ID : SB17.11960

C. GLOBALVISIONMailing Address 301 NORTH MAIN STREET
SUITE 1119

City GREENVILLE State SC Zip Code 29601

Purpose of Disbursement
PHONE LINE

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

Amount of Each Disbursement this Period

36.00

Transaction ID : SB17.11990

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

108.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 34

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. TREY GOWDY

Mailing Address PO BOX 3324

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		09		2014

City	State	Zip Code
SPARTANBURG	SC	29304

Purpose of Disbursement
MILEAGE

001

Category/
Type

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: SC District: 04

Amount of Each Disbursement this Period

277.43

Transaction ID : SB17.11937

Full Name (Last, First, Middle Initial)

B. TREY GOWDY

Mailing Address PO BOX 3324

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		30		2014

City	State	Zip Code
SPARTANBURG	SC	29304

Purpose of Disbursement
MILEAGE, MEALS, PARKING, INTERNET

002

Category/
Type

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: SC District: 04

Amount of Each Disbursement this Period

172.63

Transaction ID : SB17.11942

Full Name (Last, First, Middle Initial)

C. TREY GOWDY

Mailing Address PO BOX 3324

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		17		2014

City	State	Zip Code
SPARTANBURG	SC	29304

Purpose of Disbursement
EVENT FOOD

003

Category/
Type

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: SC District: 04

Amount of Each Disbursement this Period

74.80

Transaction ID : SB17.11975

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

277.43

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 34

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. TREY GOWDY

Mailing Address PO BOX 3324

Date of Disbursement

M M	D D	Y Y Y Y
03	25	2014

City	State	Zip Code
SPARTANBURG	SC	29304

Amount of Each Disbursement this Period

127.00

Purpose of Disbursement
MILEAGE

001

Transaction ID : SB17.11991

Candidate Name

Category/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: SC District: 04

Full Name (Last, First, Middle Initial)

B. GRAND HYATT WASHINGTON

Mailing Address 1000 H STREET NW

Date of Disbursement

M M	D D	Y Y Y Y
03	31	2014

City	State	Zip Code
WASHINGTON	DC	20001

Amount of Each Disbursement this Period

434.86

Purpose of Disbursement
HOTEL ROOM AND FOOD

002

Transaction ID : SB17.12124

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. GRAND HYATT WASHINGTON

Mailing Address 1000 H STREET NW

Date of Disbursement

M M	D D	Y Y Y Y
03	31	2014

City	State	Zip Code
WASHINGTON	DC	20001

Amount of Each Disbursement this Period

11.83

Purpose of Disbursement
FOOD

002

Transaction ID : SB17.12125

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

573.69

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. HOTEL INDIGO WACO

Mailing Address 211 CLAY AVENUE

City	State	Zip Code
WACO	TX	76701

Purpose of Disbursement
LODGING

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		15		2014

Amount of Each Disbursement this Period

276.90

Transaction ID : SB17.12000

B. HOTEL INDIGO WACO

Mailing Address 211 CLAY AVENUE

City	State	Zip Code
WACO	TX	76701

Purpose of Disbursement
FOOD

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2014

Amount of Each Disbursement this Period

14.01

Transaction ID : SB17.12126

C. Mrs. MELISSA HOUSE

Mailing Address 623 MOUNT VERNON LANE

City	State	Zip Code
DUNCAN	SC	29334

Purpose of Disbursement
ADMINISTRATIVE CONSULTING

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.11951

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1290.91

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. HUCKABY, DAVIS AND LISKERMailing Address 228 SOUTH WASHINGTON STREET
SUITE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FEC COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2014

Amount of Each Disbursement this Period

1388.50

Transaction ID : SB17.11961

B. PIRYX, INC.Mailing Address 401 WEST 15TH STREET
SUITE 520

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement
CREDIT CARD PROCESSING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2014

Amount of Each Disbursement this Period

21.53

Transaction ID : SB17.11992

C. PIRYX, INC.Mailing Address 401 WEST 15TH STREET
SUITE 520

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement
CREDIT CARD PROCESSING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2014

Amount of Each Disbursement this Period

14.44

Transaction ID : SB17.11993

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1424.47

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PIRYX, INC.Mailing Address 401 WEST 15TH STREET
SUITE 520

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement
CREDIT CARD PROCESSING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

Amount of Each Disbursement this Period

78.29

Transaction ID : SB17.11994

B. PIRYX, INC.Mailing Address 401 WEST 15TH STREET
SUITE 520

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement
CREDIT CARD PROCESSING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

Amount of Each Disbursement this Period

29.00

Transaction ID : SB17.12127

C. SOUTH CAROLINA REPUBLICAN PARTY

Mailing Address P.O. Box 12373

City Columbia State SC Zip Code 29211

Purpose of Disbursement
FILING FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		17		2014

Amount of Each Disbursement this Period

3480.00

Transaction ID : SB17.11976

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3587.29

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. THE GULA GRAHAM GROUPMailing Address 499 SOUTH CAPITOL STREET SW
SUITE 420

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
SHIPPING, EMAIL, FAXES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
01	09	2014

Amount of Each Disbursement this Period

147.29

Transaction ID : SB17.11938

B. THE GULA GRAHAM GROUPMailing Address 499 SOUTH CAPITOL STREET SW
SUITE 420

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
02	08	2014

Amount of Each Disbursement this Period

6065.00

Transaction ID : SB17.11955

C. THE GULA GRAHAM GROUPMailing Address 499 SOUTH CAPITOL STREET SW
SUITE 420

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
COMPLETE CAMPAIGNS/SHIPPING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
02	08	2014

Amount of Each Disbursement this Period

94.51

Transaction ID : SB17.11956

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6306.80

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 34

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. THE GULA GRAHAM GROUPMailing Address 499 SOUTH CAPITOL STREET SW
SUITE 420

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
COMPLETE CAMPAIGNS/SHIPPING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2014

Amount of Each Disbursement this Period

120.00

Transaction ID : SB17.11962

B. THE STONERIDGE GROUP, LLCMailing Address 4400 NORTH POINT PARKWAY
SUITE 190

City ALPHARETTA State GA Zip Code 30022

Purpose of Disbursement
WEBSITE MAINTENANCE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		02		2014

Amount of Each Disbursement this Period

19.95

Transaction ID : SB17.11996

C. THE STONERIDGE GROUP, LLCMailing Address 4400 NORTH POINT PARKWAY
SUITE 190

City ALPHARETTA State GA Zip Code 30022

Purpose of Disbursement
WEBSITE MAINTENANCE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

Amount of Each Disbursement this Period

19.95

Transaction ID : SB17.12128

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

159.90

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 34

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. THE STONERIDGE GROUP, LLCMailing Address 4400 NORTH POINT PARKWAY
SUITE 190

City ALPHARETTA State GA Zip Code 30022

Purpose of Disbursement
WEBSITE MAINTENANCE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2014

Amount of Each Disbursement this Period

19.95

Transaction ID : SB17.12129

B. U-STOR

Mailing Address 1016 SOUTH PINE STREET

City SPARTANBURG State SC Zip Code 29302

Purpose of Disbursement
STORAGE UNIT

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2014

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.11997

c. U-STOR

Mailing Address 1016 SOUTH PINE STREET

City SPARTANBURG State SC Zip Code 29302

Purpose of Disbursement
STORAGE UNIT

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2014

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.12130

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

119.95

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 34

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. U-STOR

Mailing Address 1016 SOUTH PINE STREET

City	State	Zip Code
SPARTANBURG	SC	29302

Purpose of Disbursement
STORAGE UNIT

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2014

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.12131

B. UNITED STATES POSTAL SERVICE

Mailing Address 250 SOUTH CHURCH STREET

City	State	Zip Code
SPARTANBURG	SC	29302

Purpose of Disbursement
STAMPS

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		20		2014

Amount of Each Disbursement this Period

49.00

Transaction ID : SB17.12132

C. US AIRWAYS

Mailing Address 4000 E. SKY HARBOR BOULEVARD

City	State	Zip Code
PHOENIX	AZ	85034

Purpose of Disbursement
PLANE TICKET

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2014

Amount of Each Disbursement this Period

587.50

Transaction ID : SB17.12133

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

686.50

17786.23

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 34

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AT&T MOBILITY (DATA COVERAGE)

Mailing Address POST OFFICE BOX 537104

City	State	Zip Code
ATLANTA	GA	30353

Purpose of Disbursement
DATA COVERAGE

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2014

Amount of Each Disbursement this Period

30.00

Transaction ID : SB21.12008

B. AT&T MOBILITY (DATA COVERAGE)

Mailing Address POST OFFICE BOX 537104

City	State	Zip Code
ATLANTA	GA	30353

Purpose of Disbursement
DATA COVERAGE

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2014

Amount of Each Disbursement this Period

30.00

Transaction ID : SB21.12015

C. BLUEHOST, INC.

Mailing Address 1958 SOUTH 950 EAST

City	State	Zip Code
PROVO	UT	84606

Purpose of Disbursement
WEBSITE HOSTING

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		18		2014

Amount of Each Disbursement this Period

119.88

Transaction ID : SB21.12012

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

179.88

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 34

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CAROLINA PREGNANCY CENTER

Mailing Address 103 METRO DRIVE

City	State	Zip Code
SPARTANBURG	SC	29303

Purpose of Disbursement
DONATION

012

Candidate Name

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02	/	03	/	2014

Amount of Each Disbursement this Period

350.00

Transaction ID : SB21.11953

B. CHUCK FLEISCHMANN FOR CONGRESS COMMITTEE, INC.

Mailing Address P.O. BOX 11091

City	State	Zip Code
CHATTANOOGA	TN	37401

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

CHARLES J FLEISCHMANNCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: TN District: 03

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03	/	10	/	2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB21.11964

C. CONSTITUTION COMMITTEE OF SPARTANBURG COUNTY

Mailing Address PO BOX 1104

City	State	Zip Code
INMAN	SC	29349

Purpose of Disbursement
DONATION

012

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03	/	18	/	2014

Amount of Each Disbursement this Period

250.00

Transaction ID : SB21.11985

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1600.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 34

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DOLD FOR CONGRESS

Mailing Address PO BOX 8145

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2014

City	State	Zip Code
NORTHFIELD	IL	60093

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
CONTRIBUTION

011

Transaction ID : SB21.11968

Candidate Name

ROBERT JAMES MR JR DOLDCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 10

Full Name (Last, First, Middle Initial)

B. FAMILIES FOR JAMES LANKFORD

Mailing Address PO BOX 1639

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		30		2014

City	State	Zip Code
BETHANY	OK	73008

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
CONTRIBUTION

011

Transaction ID : SB21.11944

Candidate Name

JAMES PAUL MR. LANKFORDCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: OK District: 05

Full Name (Last, First, Middle Initial)

C. FRIENDS OF FRANK GUINTA

Mailing Address P.O. BOX 877

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2014

City	State	Zip Code
MANCHESTER	NH	03105

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
CONTRIBUTION

011

Transaction ID : SB21.11967

Candidate Name

FRANK GUINTACategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NH District: 01

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 34

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TREY GOWDY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GREATER GREER CHAMBER OF COMMERCE

Mailing Address 111 TRADE STREET

City	State	Zip Code
GREER	SC	29651

Purpose of Disbursement
TABLE SPONSORSHIP

012

Category/
Type

Candidate Name

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2014

Amount of Each Disbursement this Period

400.00

Transaction ID : SB21.12022

B. MICHAEL GRIMM FOR CONGRESS

Mailing Address PO BOX 270

City	State	Zip Code
STATEN ISLAND	NY	10310

Purpose of Disbursement
CONTRIBUTION

011

Category/
Type

Candidate Name

MICHAEL GRIMM

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 11

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB21.11969

C. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
TRANSFER

008

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		18		2014

Amount of Each Disbursement this Period

50000.00

Transaction ID : SB21.11979

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

51400.00

57179.88